State of Utah Department of Public Safety APPLICATION FOR PRIVATE INVESTIGATOR LICENSE



INSTRUCTIONS

WHO MAY APPLY

You may apply for a private investigator license if you are:

- at least 21 years of age,
- · a citizen or legal resident of the United States, and
- of good moral character.

WHERE TO APPLY

Bureau of Criminal Identification 3888 West 5400 South Taylorsville, UT 84118-3549 (801) 965-4445

HOW TO APPLY

Answer all questions in the application by typing or clearly printing in ink. Attach all documentation required. The application must be signed and notarized.

COST TO APPLY

- An application fee of \$200.00 for an *agency license*. This fee will license one private investigation agency and the owner or primary investigator of that agency.
- An application of \$100.00 for a registrant or apprentice license.
- In addition to the application fee, a *non-refundable* F.B.I. fee of \$30.25 per applicant must be submitted with each application.

NOTE: The Bureau will accept cash, check, money order or credit cards. Credit card payment must include the 3 digit control number from the back of the card. Make check or money order payable to the "Utah Bureau of Criminal Identification". There will be a \$20.00 service charge for returned check. DO NOT SEND CASH IN THE MAIL

WHAT YOU NEED TO APPLY

Include the following documents:

- PHOTOGRAPHS:
 - o Two 2" x 2" color photographs, of passport quality, taken within 90 days of this application.
- PHOTOCOPY OF YOUR DRIVERS LICENSE OR STATE ISSUED IDENTIFICATION CARD.
- FINGERPRINTS:
 - Two (2) completed fingerprint cards (available at the Bureau). You may contact your local police department or sheriff's office for assistance. The Bureau does offer fingerprinting services at a cost of \$13.00.

• SURETY BOND INFORMATION:

- A surety bond in the amount of \$10,000 is required for each applicant. The bond should reference section 53-9-109, and must remain in force throughout the license period. *Please* attach a copy of the bond.
- DOCUMENTATION OF YOUR EXPERIENCE AND QUALIFICATIONS:

Agency License:

- The applicant must have at least 2,000 hours of investigative experience. Attach a verified statement of your experience to the application.
- Include a certificate of workers' compensation insurance.

Registrant License:

The applicant must have at least 1,000 hours of investigative experience. Attach a verified statement of your experience to the application.

Apprentice Applicant:

 An apprentice must work for a licensed private investigation agency.

NOTE: All attachments must be printed or typed to ensure legibility.

APPLICATION PROCESSING

- Once the Bureau receives your application, a background investigation will be conducted.
- The application will then be reviewed by the Private Investigator Hearing and Licensure Board for recommendation of issuance.
- Please allow 90 days for processing your completed application. Do not call the Bureau regarding the status of your application unless you have not received notification within this time frame.

WARNING

Falsification of any information in this application may result in denial or revocation of a license and possible criminal prosecution.

Applications will be accepted from 7:00 a.m. until 5:30 p.m. Monday – Thursday at the Bureau office. You may also apply by mail.



State of Utah **Department of Public Safety** APPLICATION FOR PRIVATE INVESTIGATOR LICENSE

Please read all instructions prior to completing this form. TYPE OR PRINT IN INK.

Your application will not be processed unless this form is completely filled out and all applicable questions have been answered.

Be sure to provide all supporting documents and two full sets of fingerprints. Enclose the appropriate fee amount in the form of

cash, check, money order or credit card.	Check should be made paya	ble to "Utah Bureau of Criminal	Identification".	
	FEES ARE NON-RE	FUNDABLE		
☐ Agency License - \$230.25	☐ Registrant License - Note: fee includes \$30	\$130.25	se - \$130.25	
NAME:				
(Last)	(First)		(Middle)	
DATE OF BIRTH:	PLACE OF BIRTH			
PREVIOUSLY USE D NAME(S) (Maiden, etc.)_				
SSN#BOND#_	EXPIRA	ΠΟΝ		
ADDRESS(Street)	(City)	(State)	(Zip)	
MAILING ADDRESS (IF DIFFERENT FROM ST	TREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·		
HOME PHONEWOI	RK PHONE	DRIVER LIC # / STATE		
HEIGHTWEIGHT	EIGHTEYE COLORHAIR COLORSEX			
ARE YOU A UNITED STATES CITIZEN?	IF "NO" ENTER YOUR AL	IEN REGISTRATION		
#				
ALL APPLICANTS: Please answer "Yes including expunged and juvenile court re				
☐ Yes ☐ No Have you ever been convic				
☐ Yes ☐ No Have you ever been convicted of any act involving illegally using, carrying, or possessing a dangerous				
weapon?				
☐ Yes ☐ No Have you ever been convic	• •			
☐ Yes ☐ No Have you ever been convicted of any act constituting dishonesty or fraud?				
☐ Yes ☐ No Have you ever been convicted of any act involving moral turpitude? (i.e., theft, shoplifting, sex crimes, etc.)				
☐ Yes ☐ No Are you currently on probation, parole, or named in an outstanding arrest warrant?				
☐ Yes ☐ No Have you ever been licensed as a private investigator in another state or jurisdiction?				
☐ Yes ☐ No If you were previously licensed as a private investigator in another state or jurisdiction, were you ever				
charged with a civil or crim	ninal violation that resulted in d	isciplinary action against your licens	se?	
ALL AGENCY APPLICANTS: Prov	vide information below regarding	ng the private investigator agency for	r which you will work.	

AGENCY NAME		PHONE #		
AGENCY ADDRESS(Street)	(City)	(State)	(Zip)	
MAILING ADDRESS (If different)(Street)	(City)	(State)	(Zip)	

ALL APPLICANTS: Please read and sign the statement below. Your signature must be NOTARIZED to complete this form.			
I,			
Subscribed and sworn to thisday of			
Notary Public			
METHOD OF PAYMENT (CHECK APPROPRIATE BOX) Payment enclosed (check or money order only) □ Credit Card □ Credit Card payment must include 3 digit control number found on the back of the credit card. There is a \$20.00 service charge for any returned check.			
Credit Card Orders:			
Card Number 3 digit control # Expiration Date			
Signature:			
Phone Number:			